



**CANDIDATE'S STATEMENT OF ORGANIZATION AND
DESIGNATION OF PRINCIPAL COMMITTEE OR EXPLORATORY COMMITTEE**

(CFA-1)

State Form 4604 (R12/9-09)

Indiana Election Commission (IC 3-9-1-3; IC 3-9-1-4; IC 3-9-1-5)

PLEASE TYPE OR PRINT LEGIBLY IN BLACK INK. SEE INSTRUCTIONS ON REVERSE SIDE.

FILE NUMBER

1. IS THIS AN AMENDMENT? ☒ No ☐ Yes If Yes, please enter the file number in this box →

SECTION A. CANDIDATE INFORMATION: Fill in all applicable boxes as fully and accurately as possible.

2. Last Name ROTH	First Name JAMES	Middle Name DAVID	Nickname Jim	3. Type of Committee (Check one) <input checked="" type="checkbox"/> Candidate's Principal Committee <input type="checkbox"/> Exploratory Committee	
4. Mailing Address 1545 TEMPERANCE AVE			5. FAX (Optional) ()	6. E-mail Address (Optional) kurley57@gmail.com	
7. City INDIANAPOLIS	State IN	ZIP Code 46203	8. County MARION	9. Telephone (Day) (317) 409 9203	10. Telephone (Evening) (317) 409 9203
11. Party Affiliation <input checked="" type="checkbox"/> Democratic <input type="checkbox"/> Libertarian <input type="checkbox"/> Republican <input type="checkbox"/> Other			12. Office Sought (Include district number, if any. Not required for an exploratory committee.) MARION COUNTY CORONER		

SECTION B. COMMITTEE INFORMATION: Fill in all applicable boxes as fully and accurately as possible.

13. Full Name of Committee (Do not abbreviate) <input type="checkbox"/> Check if this is a new name JAMES JR Jim ROTH FOR MARION COUNTY CORONER					
14. Mailing Address <input type="checkbox"/> Check if this is a new address 1545 TEMPERANCE AVE			15. FAX (Optional) ()	16. E-mail Address (Optional) CORONER@JIMROTHFORMARIONCOUNTY.COM	
17. City INDIANAPOLIS	State IN	ZIP Code 46203	18. County MARION	19. Telephone (317) 409 9203	20. Committee Organization Date (MM-DD-YY) 1-6-2016
21. Chairperson's Full Name <input checked="" type="checkbox"/> Designate Candidate as Chairperson <input checked="" type="checkbox"/> Check if this is a new chairperson JAMES DAVID ROTH JR					
22. Mailing Address <input type="checkbox"/> Check if this is a new address 1545 TEMPERANCE AVE			23. FAX (Optional) ()	24. E-mail Address (Optional) kurley57@gmail.com	
25. City INDIANAPOLIS	State IN	ZIP Code 46203	26. County MARION	27. Telephone (Day) (317) 409 9203	28. Telephone (Evening) (317) 409 9203
29. Bank or Other Depositories (List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.) HUNTINGTON BANK					
30. Exploratory Committee (Give brief statement explaining purpose of an exploratory committee only.)			31. Salaries and Reimbursements (Will the committee pay the candidate a salary or reimbursement for lost wages? If Yes, attach a copy of the contract.) <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

SECTION C. APPOINTMENT OF TREASURER (IC 3-9-1-14)

32. I, as Chairperson of the foregoing committee, appoint the following person as Treasurer of the Committee. jr			Person Appointed Treasurer JAMES ROTH JR			Signature of the Committee Chairperson JAMES D ROTH		
33. Treasurer's Full Name <input checked="" type="checkbox"/> Designate candidate as treasurer <input type="checkbox"/> Check if this is a new treasurer JAMES DAVID ROTH JR								
34. Mailing Address <input type="checkbox"/> Check if this is a new address 1545 TEMPERANCE AVE			35. FAX (Optional) ()	36. E-mail Address (Optional) kurley57@gmail.com				
37. City INDIANAPOLIS	State IN	ZIP Code 46203	38. County MARION	39. Telephone (Day) (317) 409 9203	40. Telephone (Evening) (317) 409 9203			

SECTION D. ACCEPTANCE OF APPOINTMENT (IC 3-9-1-15)

41. I give notice that I accept the duties and responsibilities of Treasurer of this Committee. I am not the chairperson of a campaign finance committee (except as permitted for a candidate committee under IC 3-9-1-7).

Signature of Person Accepting Appointment
James D. Roth

SECTION E. CERTIFICATION OF STATEMENT

We certify as the candidate and the duly appointed Chairperson of the Committee and that we have examined this statement. To the best of our knowledge and belief it is true, correct and complete.

42. Typed or Printed Name of Chairperson JAMES D. ROTH	Signature of Chairperson James D. Roth	Date (MM-DD-YY) 1-6-2016
43. Typed or Printed Name of Candidate JAMES D. ROTH	Signature of Candidate James D. Roth	Date (MM-DD-YY) 1-6-2016

Warning: State law requires that any change in this information be reported within 10 days of the change (IC 3-9-1-10). A person who knowingly files a fraudulent report commits a Class D felony (IC 3-14-1-13). A person who fails to file a complete or accurate report as required by the Indiana Campaign Finance Law commits a Class B misdemeanor (IC 3-14-1-14), and may be subject to civil penalties (IC 3-9-4-16, IC 3-9-4-17, and IC 3-9-4-18).

FOR OFFICE USE ONLY

FILED

JAN 06 2016

Mylan A. Eldridge